DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 04/26/2006

Provider Inspection Summary

For the period 04/01/2003 to 03/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Facility Information

Facility Name: RICHMOND WAY CBRF (0009167)

Address: N6032 STATE HWY 89, DELAVAN, WI 53115

License Status: REGULAR

Licensed/Certified/Registered 11/21/2000

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0094373 End Date: 03/22/2005 Type: OTHER Purpose: COMPLAINT/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0093397 End Date: 09/23/2004 Type: ABBREVIATED Purpose: SURVEY/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0091192 End Date: 09/19/2003 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 04/26/2006

Provider Inspection Summary

For the period 04/01/2003 to 03/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Complaint History

Date Complaint Received: 08/20/2004 Date Investigation Completed: 03/22/2005

Subject Area(s) Result SOD #

PROGRAM SERVICES NOT SUBSTANTIATED

Date Complaint Received: 06/17/2003 Date Investigation Completed: 09/19/2003

Subject Area(s) Result SOD #

RESIDENT RIGHTS NOT SUBSTANTIATED